Efficacy of *Samsharkara Churna* in *Kaphaj Kasa*

Research Article

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Abstract

According to *Ayurveda kasa* is an independent disease, the Excellency of *ayurveda* over other medical sciences is that it had not only metioned *'Kasa'* as a symptom in various disease but also described it as an independent *vyadhi* with its separate Pathogenesis, symptoms, signs, types and treatment. If control over *kasa vyadhi* is not achieved in time it can give rise to life threatening diseases like *Swasa, Shosa, Rajyakshama, UraKshata, Rakttapitta, granthi, Arbuda* of respiratory tract etc. so to avoid above complications it is must to avoid on *kasa vyadhi*, hence a clinical study was carried out to study efficacy of *Samsharkara churna*. In the present study 60 patients are studied. The result were statistically analyzed with the help of chi-square test and the result have shown that the *samsharkara churna* have good results in the *kaphaj kasa*.

Keywords: *Kaphaj Kasa, samsharkara churna*, Cough.

Introduction:

Prana the most important among the five types of *vayu* and related with life, therefore any abnormality in its function leads to disturbance of all the functions as *prana* is *sarvagata* as " *Kasa* is one of the primary disease of *pranavaha strotasa*, if neglected can affect 'Sarvagat prana' & can hence cause disturbance in other body functions. (1)(2)(3)

Correlating modern science with *ayurveda*, oxygen present in air that is

The central cough suppressants e.g. opioids like codein, noscapine, dextro methorphan, and antihistaminic antitussives like diphenhydramine, steroids e.g. prednisolone are the commonest drugs and used for symptomatic relief from

taken inside lungs during inspiration can be considered as *Bahya prana vayu* i.e. *ambarpiyusha* (4). Oxyhaemoglobin from alveo-capillary exchange and nutritional substances produced after metabolism enter the blood. Both of them constitute the internal (*Aabhayantar*) *prana vayu* as both of them nourish every tissue of body.

In modern medicine the drug, which are used in symptomatic treatment of cough, are called antitussive.

cough.

Ayurveda had not only provided a wide range of drugs but also provided the various preventive measures to be followed while cured the disease. The respiratory system may be affected by various inhaled toxic agents. These inhaled toxic agents acts by direct toxicity on respiratory system or through immune mechanism. Such exposure can be either occupational or environmental.

Ayurveda has not only described inhaled toxins but also described impairment of digestive process as one of

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the constituent of pathogenesis of *kasa vyadhi*.

Charak, the father of Indian medicine has mentioned basic principles of treatments for the management of *kasa*.

1) *Shodhana Chikitsa*
2) *Shamana Chikitsa*

   Shamana is one of the easiest and economical therapy

for *kasa*. *Churna* is one of the *kalpana* mentioned by *Sharangdhar* in *Sharangdhar samhita* (5).

Materials & Methods:-

In the present study *Samsharkara Churna(6)* will be prepared using plants given below with *Bhavaprakash Samhita*.

Table 1: Showing the plants used for the preparation of the *Samsharkara Churna.*

Sr. no	Drug Name	Botanical Name	Family	Qty.
1	*Lavang*	Syzygium aromaticum (Linn.)	Myrtaceae	10 gm
2	*Jatiphala*	Mystrica fragrance (Houtt.)	Myristiceae	10 gm
3	*Pippali*	Piper longum(Linn.)	Piperaceae	10 gm
4	*Marich*	Piper nigrum(Linn.)	Piperaceae	20 gm
5	*Shunthi*	Zinziber officinale(Roxb.)	Zinzibraece	16 gm

Other constituents:-

1) *Sharkara* 210gm.

Table 2:- Properties of Drug

Drug / Character	*Marich (7)*	*Pippali (8)*	*Jayphal (9)*
Gana	Dipaniya Shirovirechana	Kasahar Hikkanigraha	

	(Cha)	*(Cha)*	
Family	Piperaceae	Piperaceae	Mytraceae
Latin Name	Piper nigrum	Piper longum	Myristica fragrans
Guna	*Rasa- katu Vipak-Katu Virya – Ushna Guna-Laghu, tikshna*	*Rasa- tikta,katu Vipak-Katu, shushka Virya – Ushna Guna-Laghu, tikshna*	*Rasa- tikta, katu Vipak-Katu Virya – Ushna Guna-Laghu, tikshna Snigdha*
Useful part	(Fruit) *Phala*	*Phala*	*Beeja (Seeds) Kosha*
Dose	*Churna* 1-5gms	0.5-1gms	0.5-1gms

Table 3:-

Drug / Character	*Lavang (10)*	*Suntha (11)*
Gana	Mytraceae	Zinziberaceae
Family	Piperaceae	Piperaceae
Latin Name	Syzygium aromaticum	Zinziber officinale
Guna	*Rasa- tikta,katu Vipak- Katu Virya – shita Guna- Laghu, tikshna,snigdha*	*Rasa- katu Vipak-madhur Virya – Ushna Guna-Laghu, snigdha*
Useful part	(Flower) *Pushpa*	*Kanda (Rhizome)*
Dose	*Churna* 1-2gms	*Churna* 1-2gms

Method:-

A) Sixty patient of *kaphaj kasa vyadhi* willing for treatment.

B) *Samsharkara Churna* was prepared in the department of *kayachikitsa* of S.V.N.H.T's, Ayurved college, rahuri.

60 patients fulfilling the criteria for the diagnosis of disease were registered from the OPD of *Kaychikitsa* Dept. of Ayurved College Hospital, Rahuri, and *Samsharkara Churna* was given to all of them.

Grouping

1. Trial Group - 30 patients – Trial Drug Dose – 10 gm
2. Control Group – 30 Patients – Starch Capsul dose – 10 gm.

Written consent was taken from patient before starting therapy, various time to time investigation and examining procedures are done.

Investigations:-

1) Chest X-Ray
2) Erythrocyte Sedimentation Rate
3) Complete Blood Count (WBC count)

Selection Criteria:-

1) Inclusive criteria-

1) Patient ready for this study willing for treatment.

2) Patient of age group 18 to 60 years of age.

3) Patient with signs & symptoms of *Kaphaj kasa* as described in *grantha.(*12)

4) Patient selection will be irrespective of season and *prakruti* also.

2) Exclusive Critetria:-

1) Patients with *vataj, pittaj, kshayaj, kshataja kasa*.

2) Patient with severe systematic disease like cardiac disease, renal failure, CVA, HIV etc., will be excluded.

3) Patients with pneumonia, Asthma, T.B., Bronchiectasis, CA Lungs etc will be excluded.

4) Pregnant women and lactating mothers will be excluded.

5) Patients below age of 18 Years and above age 60 yrs.

Table 4: Patient's frequency acc. to age group

Age group in years	No. of Patients(Out of 60)	Percentage
18-25	11	18.33%
26-35	19	31.66%
36-45	19	31.66%
46-60	11	18.33%

Table 5:- Patient's Frequency acc. to sex

Sex of patient	No. of Patient(out of 60)	Percentage
Male	48	80.00%
Female	12	20.00%

Table 6:- Patients Frequency acc. to *Prakruti*

Prakruti	No.of patient (out of 60)	Percentage
Vata Pradhan Kapha	12	20.00%
Vata Pradhan Pitta	14	23.33%
Pitta Pradhan Vata	10	16.67%
Pitta Pradhan Kapha	06	10.00%
Kapha Pradhan Vata	07	11.67%
Kapha Pradhan Pitta	11	18.33%

Table 7:- Schedule of Treatment

Medicine	*Samsharkara Churna*
Dose	10gms / Day,

	divided into 3 doses.
Anupana	*Madhu*
Aushadh Sevan kala.	*1) Apaan kali Prabhat kala* *2) Pratah Paschat Bhakta* *3) Sayam paschat Bhakta*
Duration of medicine	15 day
Follow up	5/10/15 Day's

Table 8: Observation Table

A) Objective Parameters:-
   1) Frequency of cough attack in 24hrs.
   - 10 cough attack in 24hrs : Grade I
   - 20 cough attack in 24hrs : Grade II
   - 30 cough attack in 24hrs : Grade III
   2) Duration of Each cough attack.
   - 5-10 sec- Grade-I
   - 15-60 sec- Grade- II
   - more than 90 sec- Grade-III
   3) *Kshtivan*
   - *Alpa Kshtivan*- Grade I
   - *Madhyam Kshtivan* – Grade II
   - *Prabhut Kshtivan* – Grade III
   4) *Chardi Vega* / Day
   - Absent
   - Present
   - Present – number of *Chardivega*
   5) *Jwara*- present, absent
   6) Auscultation
      A] Rhonchi-
Alpa-Low Intensity Sound- Grade I
Madhyam- High Intensity sound- Grade II
Prabhut – Very High intensity sound-
Grade III
      B] Crepts-
Alpa- Low Intensity Sound-Grade I
Madhyam- High Intensity sound- Grade II
Prabhut – Very High intensity sound-
Grade III
B) subjective Parameters:-
   1) *Shwas Kashtata*:
      Absent – Grade I
      Mild – Grade II
      Moderate – Grade III

   2) *Mandgani-*
   -Hunger after 6 hrs of 1st meal in a day-
      Grade I
   -Hunger after 8 hrs of 1st meal in a day-
      Grade II
   -Hunger after 12 hrs of 1st meal in a
day-
      Grade III
   3) *Aruchi*- Present, Absent
   4) *Aanggaurava*- Present, Absent
   5) *Lomaharsha* - Present, Absent
   6) *Aasymadhurya*- Present, Absent

Table No.-9   Frequency of Clinical features.

Clinical Features	No of Patients (out of 60)	Percentage
Frequency of cough attack in 24 hrs.	60	100
Kshtivan	28	46.65
Chardi vega / day	3	5
Jwara	2	3.33
Ronchi	3	5
Crepts	1	1.66
Shwaskshtata	10	16.66
Mandagni	53	88.33
Aruchi	38	63.33
Lomaharsha	28	46.65
Aanggaurava	23	38.30
Aasya madhurya	15	25

Table No. 10   Results seen in Clinical Features

Sr. no	Symptoms	*Samsharkara Churna*	Starch Capsule
1	Frequency of cough attack in 24 hrs	100%	38%
2	*Ksthivan*	46.65%	2%

3	*Chardi vega / day*	5%	1%
4	*Jwara*	3.33%	0%
5	Rhonchi	5%	0%
6	Crepts	16.66%	1%
7	*Shwaskshtata*	16.66%	2%
8	*Mandagni*	88.33%	5%
9	*Aruchi*	63.33%	6%
10	*Lomaharsha*	46.65%	3%
11	*Aanggaurva*	38.30%	10%
12	*Aasymadharya*	25%	7%

Table No. 11 Result in clinical feature *Kasa Vega* Frequency in 24 Hours.

Sr. no	*Upashaya /Anupashay*	No. of Patients (Out of 30)	*By Samsharkara Churna (%)*	No of Patients	By starch tablet (%)
1	*Uttam Upashaya*	22	73.33%	3	10.00%
2	*Madhyam Upashaya*	0	0%	4	13.33%
3	*Anupashaya*	8	26.66%	23	76.66%

Above sign and symptoms (both subjective and objective parameters, as shown in table no. 8) are considered as clinical picture of *kaphaj kasa vyadhi* for analysis of the results obtained by medicine *samsharkara churna*.

Criteria for assessment of overall symptoms-
1) **Cured-** Total Relief In Symptoms 75% To 100%
2) **Markedly Improved-** 50% To 75% Improvement From Signs And

Symptoms Is Termed As Markedly Improved
3) **Improved-** Improvement Range In Between 25% To 50% Responded By Patient In Signs And Symptoms Is Taken For Improved.
4) **Unchanged-** The Patient Presenting Less Than 25% Improvement In Their Signs And Symptoms Are Taken As Unchanged.

Table 12:- Percentage of relief of *Samsharkara Churna* and Starch Capsule.

	Samsharkara Churna		Starch Capsule	
Effect	No. of Patient	Percentage	No. of Patient	Percentage
Cured	7	23.33	4	13.33
Markedly Improved	21	70	15	50
Improved	2	6.66	10	33.33
Unchanged	0	0	1	3.33
Total	30	100	30	100

Discussion and Conclusion-

Sixty patients with *Kaphajkasa vyadhi* were studied for the efficacy of *samsharkara churna* In *samprapti* of the disease following are the etiological factors.

Dosha- *vata, Pitta, Kapha*, mainly *apana vayu prakop* which causes in turn *prakop* of *udan* and *pranvayu*.

Dushya- *Rasa raktadi seven dhatus* as they related to *pranvaha strotasa*.

Sthana sansrya- *pranvaha strotasa* and its *mula sthana(*13)

Strotodushti- Mainly *pranavha strotasa* and other *strotasa i.e. Rasa, Rakta udaka,*

majja, *Anna*, and *purishvaha strotasa* are related to it.

Maximum number of patients belongs to age group 26 to 45. Out of 60 patients were 80% male and 20% were female. Regarding *prakruti* 20% belong to *vata pradhan kapha*, 23.33% belong to *vata pradhan pitta*. 16.67% belong to *pitta pradhan vata*. 10% belong to *pitta pradhan kapha*. 11.67% belong to *kapha pradhan vata* and 18.33% belong *kapha pradhan pitta prakruti*.

Out of 60 patients 13.33% were students. 25 to 30% of patients showed addiction to smoking, alcohol intake and tobacco chewing.

The result obtained in the present study showed that *samsharkara churna* is highly effective in the management of *kaphaj Kasa*. Starch capsules showed only significant result. In the treatment with *samsharkara Churna* 23.33% got completely cured, 70% markedly improved and 6.66% got improved, where as with the starch capsule 13.33% got completely cured, 50% got markedly improved, 33.33% have got improved and 3.33% patient didn't show any change in the condition. Thus the result has shown that the *samsharkara churna* is very effective against *Kaphaj Kasa Vyadhi.*

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